NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 751019

1. Corporation Name

BEN-MOL CONDOMINIUM ASSOCIATION, INC.				* 2 272243-9010	8 - 26 *	
Principal Place 7325-7327 MIAMI BCH FL US	. 33141	Mailing Address 7327 BYRON AVENUE MIAMI BCH FL 33141 US				
7.325	1321 BIBON	AUE MIH MI 2a. Mailing Address Fo	BEALT	3. Date incorporated or Qualified		
21	lace of Susiness	28 7327 /5	TRONHUE	02/13/1980		
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	1	4. FEI Number	Applied For	
22		27	·,·	65-0666997	Not Applicable	ı
City & Stat	n / /	City & State	EALHEL	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23 = M/= K	Country	Zip	Country 0	6. Election Campaign Financing	\$5.00 May Be	==-
24 33/1		29 33/4/ 30		Trust Fund Contribution	Added to Fees	
<u> </u>	9. Name and Address of Curren	r Registered Agent		10. Name and Address of New Registered	Agent	
			81 Name	FLIPE DE LA F	<i>ff</i> Z	ļ
URIBE, CO	ONSUELO		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	112	
7327 BYRON AVE #3			83 / Dal 2	83 7325 13400 N HUE APTA 2		
MIAMI BE	ACH FL 33141					
			84 City	A BEACH. FL	85 Zip Cods	
11. Pursuant	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statutes,	the above-named corpo	oration submits this statement for the purpose of	changing its registered	
office or r agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was autrions of, Section 617.0503, Florid	a Statutes.	1 / n n n n n	3 / - 66	
SIGNATURE	7-8/11	DE DE PAPA	2	THE ALL PER	2/25/17 .	_
12.	Signature, typed or printed name of registered agent OFFICERS AN		edistered Agent eignature required 13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	(11/98)
TTLE	PD	DELETE	1,1 TITLE		Change Addition	Ξ
NAME	DE LA PAZ, MELIDA		1.2 NAME			
STREET ADDRESS				•		~
CITY-SY-ZIP	MIAMI BEACH FL 33141		1.3 STREET ADDRESS			E03
)R2E037
TITLE	TD	☐ DELETE	1.3 STREET ADDRESS		Change Addition	CR2E037
NAME	TD De la paz, felipe	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	1	☐ Change ☐ Addition	CR2E033
	TD DE LA PAZ, FEUPE 7325 BYRON AVE #2	□ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition	CR2E033
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CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal affect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

FILED

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90123 008 ****61.25